

Index of Claims



Application No.

09/893,166

Examiner

Jason R Bellinger

Applicant(s)

SCHLANGER, RAPHAEL

Art Unit

3617

✓	Rejected
=	Allowed

-	(Through numeral) Cancelled
+	Restricted

N	Non-Elected
I	Interference

A	Appeal
O	Objected

Claim	Date
Final	Original
1	9/24/02
2	12/15/02
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
32	
33	
34	
35	
36	
37	
38	
39	
40	
41	
42	
43	
44	
45	
46	
47	
48	
49	
50	

Claim	Date
Final	Original
51	9/24/02
52	12/15/02
53	
54	
55	
56	
57	
58	
59	
60	
61	
62	
63	
64	
65	
66	
67	
68	
69	
70	
71	
72	
73	
74	
75	
76	
77	
78	
79	
80	
81	
82	
83	
84	
85	
86	
87	
88	
89	
90	
91	
92	
93	
94	
95	
96	
97	
98	
99	
100	

Claim	Date
Final	Original
101	9/24/02
102	12/15/02
103	
104	
105	
106	
107	
108	
109	
110	
111	
112	
113	
114	
115	
116	
117	
118	
119	
120	
121	
122	
123	
124	
125	
126	
127	
128	
129	
130	
131	
132	
133	
134	
135	
136	
137	
138	
139	
140	
141	
142	
143	
144	
145	
146	
147	
148	
149	
150	

Index of Claims



Application No.

09/893,166

Examiner

Jason R Bellinger

Applicant(s)

SCHLANGER, RAPHAEL

Art Unit

3617

✓	Rejected
=	Allowed

-	(Through numeral) Cancelled
+	Restricted

N	Non-Elected
I	Interference

A	Appeal
O	Objected

Claim		Date	
Final	Original		
151	✓	10/30/03	
152	✓	4/30/04	
153	✓	12/25/04	
154	✓	1/6/05	
155	✓		
156	✓		
157	✓		
158	✓		
159	✓		
160	✓		
161	✓		
162	✓		
163	✓		
164	✓		
165	✓		
166	✓		
167	✓		
168	✓		
169	✓		
170	✓		
171	✓		
172	✓		
173	✓		
174	✓		
175	✓		
176	✓		
177	✓		
178	✓		
179	✓		
180	✓		
181	✓		
182	✓		
183	✓		
184	✓		
185	✓		
186	✓		
187	✓		
188	✓		
189	✓		
190	✓		
191	✓		
192	✓		
193	✓		
194	✓		
195	✓		
196	✓		
197	✓		
198	✓		
199	✓		
200	✓		

Claim		Date	
Final	Original		
201	✓	10/30/03	
202	✓	4/30/04	
203	✓	12/25/04	
204	✓	1/6/05	
205	✓		
206	✓		
207	✓		
208	✓		
209	✓		
210	✓		
211	✓		
212	✓		
213	✓		
214	✓		
215	✓		
216	✓		
217	✓		
218	✓		
219	✓		
220	✓		
221	✓		
222	✓		
223	✓		
224	✓		
225	✓		
226	✓		
227	✓		
228	✓		
229	✓		
230	✓		
231	✓		
232	✓		
233	✓		
234	✓		
235	✓		
236	✓		
237	✓		
238	✓		
239	✓		
240	✓		
241	✓		
242	✓		
243	✓		
244	✓		
245	✓		
246	✓		
247	✓		
248	✓		
249	✓		
250	✓		

Claim		Date	
Final	Original		
101	✓		
102	✓		
103	✓		
104	✓		
105	✓		
106	✓		
107	✓		
108	✓		
109	✓		
110	✓		
111	✓		
112	✓		
113	✓		
114	✓		
115	✓		
116	✓		
117	✓		
118	✓		
119	✓		
120	✓		
121	✓		
122	✓		
123	✓		
124	✓		
125	✓		
126	✓		
127	✓		
128	✓		
129	✓		
130	✓		
131	✓		
132	✓		
133	✓		
134	✓		
135	✓		
136	✓		
137	✓		
138	✓		
139	✓		
140	✓		
141	✓		
142	✓		
143	✓		
144	✓		
145	✓		
146	✓		
147	✓		
148	✓		
149	✓		
150	✓		